



Firearm Safety: _____

Paid: No Charge

Date: _____

Clerk: _____

2016 CAPABLE PARTNERS ARCHERY HUNTING PERMIT

Deer & Turkey (Fall Season)

Date Attended Class _____

Chief of Police authorization _____

Hunter's Name: _____
Last First Middle Date of Birth

Current Address: _____
Number Street Apt. Number

City County State Zip

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Hunters **MUST** register every deer killed by calling Officer Wareham @ 763-494-6196. Please leave a message including your name, date, sex of deer, adult/fawn, and address of property where shot. You must **ALSO** register all harvested deer with the MN DNR website or at a Big Game Registration Station.

I, **Officer Dominic Wareham**, give permission to the above named party to hunt at the address of:

Svitaks / Zone: Svitaks Woods

POLICE DEPT AUTHORIZATION: _____ DATE: _____ CLERK: _____

☐ Hunting Survey Returned